Form 700 - Employee DIVISION OF MANAGEMENT SERVICES

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS

FAIR POLITICAL RACTICES COMMIS**COVER PAGE**

FEB 25 2010

Official Use Only

Please type or print in ink.

10 MAR -4 PM A: Public Document

HUMAN RESOURCES OFFICE

NAME (LAST)	(FIRST)	(MIDDLE	<u>:</u>)	DAYTIME TELEPHONE NUMBER
Cowin	Mark	W		(916) 653-7007
MAILING ADDRESS STREET (Business Address Acceptable)	CITY	STATE	ZIP CODE	OPTIONAL: E-MAIL ADDRESS
1416 Ninth Street	Sacramento	CA	95814	
1. Office, Agency, or Court		4. Schedule Summary		
Name of Office, Agency, or Court:		► Total number of pages 2		
Department of Water Resources		including this cover page:		
Division, Board, District, if applicable:		► Check applicable schedules or "No reportable		
Executive		interests." I have disclosed interests on one or more of the attached schedules:		
Your Position:				
Director ·		Schedule A-1 Yes – schedule attached Investments (Less than 10% Ownership) Schedule A-2 Yes – schedule attached Investments (10% or Greater Ownership) Schedule B Yes – schedule attached Real Property		
▶ If filing for multiple positions, list				
position(s): (Attach a separate sheet if necessary.) Agency: Position:				
,	Check at least one box)	and Travel Paym	ents)	
X State □ County of		Schedule D Yes – schedule attached		
· *	1			
City of		Schedule E		
☐ Multi-County		-or-		
Other		<u> </u>		
3. Type of Statement (Ch	eck at least one box)	No report	table interests	on any schedule
"	ate: 2 / 01 / 10			
•	ļ	5. Verificati	on	
Annual: The period covered is January 1, 2009, through December 31, 2009.		I have used a	all reasonab	e diligence in preparing this
-or-		statement. I h	ave reviewed	this statement and to the best tion contained herein and in any
O The period covered is December 31, 2009.	_//, through	attached sched	dules is true a	and complete.
Leaving Office Date Left:/(Check one)		I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.		
O The period covered is January 1, 2009, through the date of leaving office.		Date Signed .	Mur	(month, day, year)
O The period covered is/, through the date of leaving office.		Signature	=ile the originally s	3/20/0 Ighed statement with your filing official.)
Candidate Election Year:	<u> </u>		EBBC Form 700 (2009/2010)	

SCHEDULE C Income, Loans, & Business Positions (Other than Gifts and Travel Payments)

CALIFORNIA FORM FAIR POLITICAL PRACTICES COR	
Name	

1. INCOME RECEIVED	► 1. INCOME RECEIVED		
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME		
Resources Law Group			
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)		
555 Capitol Mall, Sacramento CA 95814			
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE		
Law Practice			
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION		
<u>n/a </u>			
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED		
\$500 - \$1,000	\$500 - \$1,000 S1,001 - \$10,000		
\$10,001 · \$100,000 🔀 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000		
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED		
Salary Spouse's or registered domestic partner's income	Salary Spouse's or registered domestic partner's income		
Loan repayment	Loan repayment		
Sale of(Property, car, boat, etc.)	Sale of(Property, car, boat, etc.)		
(Property, car, boat, etc.)			
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more		
	The entry		
Other (Describe)	Other(Describe)		
1	1		
▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER	HOD		
* You are not required to report loans from commercial	lending institutions, or any indebtedness created as part		
of a retail installment or credit card transaction, made	e in the lender's regular course of business on terms		
not in a lender's regular course of business must be	your official status. Personal loans and loans received		
flot III a leffdel a fegular course of business must be	discipated do follows.		
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)		
	%		
ADDRESS (Business Address Acceptable)	OFFILINITY FOR LOAN		
	SECURITY FOR LOAN None Personal residence		
BUSINESS ACTIVITY, IF ANY, OF LENDER			
· · · · · · · · · · · · · · · · · · ·	Real Property		
HIGHEST BALANCE DURING REPORTING PERIOD			
S500 - \$1,000	Сйу		
\$1,001 - \$10,000	Guarantor		
\$10,001 - \$100,000			
OVER \$100,000	Other		
	(Describe)		
Comments:			